

Application Data Sheet

**Application Information**

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	DEVICE FOR ASSISTING IN TOTAL KNEE PROSTHESIS IMPLANTATION
Attorney Docket Number::	0512-1318
Request for Early	No
Publication?::	
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	27
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: PATRICK  
Middle Name::  
Family Name:: SCHIFRINE  
Name Suffix::  
City of Residence:: VEYRIER DU LAC  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 7, ROUTE DE THONES  
Address::  
City of Mailing Address:: VEYRIER DU LAC  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-74290

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: CHRISTOPHE  
Middle Name::  
Family Name:: FORNASIERI  
Name Suffix::  
City of Residence:: MEYLAN  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 14 AVENUE CHARTREUSE  
Address::  
City of Mailing Address:: MEYLAN

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-38240

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: PASCAL

Middle Name::

Family Name:: VIE

Name Suffix::

City of Residence:: MONT SAINT AIGNAN

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 60 RUE DES BULINS

Address::

City of Mailing Address:: MONT SAINT AIGNAN

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-76130

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: JACQUES

Middle Name::

Family Name:: LE SAOUT

Name Suffix::

City of Residence:: LANDEDA

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 261 KAMEULEUD

Address::

City of Mailing Address:: LANDEDA  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-29870

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: THIERRY  
Middle Name::  
Family Name:: MUSSET  
Name Suffix::

City of Residence:: LARMOR PLAG  
State or Province of  
Residence::

Country of Residence:: FRANCE  
Street of Mailing 4, RUE TOURVILLE  
Address::  
City of Mailing Address:: LARMOR PLAG  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-56260

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: PATRICK  
Middle Name::  
Family Name:: LAURENT  
Name Suffix::  
City of Residence:: PUYSMIROL  
State or Province of  
Residence::

Country of Residence:: FRANCE  
Street of Mailing FOULON D'AUZEL  
Address::  
City of Mailing Address:: PUYMIROL  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-47270

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-MARIE  
Middle Name::  
Family Name:: TRILLAUD  
Name Suffix::  
City of Residence:: PERRIGNIER  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing ROUTE DE L'ORATOIRE, BRÉCORENS  
Address::  
City of Mailing Address:: PERRIGNIER  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-74550

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: PHILIPPE  
Middle Name::  
Family Name:: DUCASSE  
Name Suffix::  
City of Residence:: BAYONNE

State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 9 AVENUE MAURICE GOALARD  
Address::  
City of Mailing Address:: BAYONNE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-64100

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: CYRIL  
Middle Name::  
Family Name:: TARQUINI  
Name Suffix::  
City of Residence:: SAUZET  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 550, CHEMIN MI-COLLINE  
Address::  
City of Mailing Address:: SAUZET  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-26740

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: YVES  
Middle Name::  
Family Name:: GIROU

Name Suffix::  
City of Residence:: LA ROCHE SUR YON  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 60 RUE GÉRARD PHILIPPE  
Address::  
City of Mailing Address:: LA ROCHE SUR YON  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-85000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-LEON  
Middle Name::  
Family Name:: BOSREDON  
Name Suffix::  
City of Residence:: BORDEAUX  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 78 AVENUE DE LA RÉPUBLIQUE  
City of Mailing Address:: VEYRIER DU LAC  
State or Province of Mailing  
Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing F-33200  
Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: BELGIUM  
Status:: Full Capacity

Given Name:: LOUIS  
Middle Name::  
Family Name:: LOOTVOET  
Name Suffix::  
City of Residence:: NAMUR  
State or Province of  
Residence::  
Country of Residence:: BELGIUM  
Street of Mailing Address:: 17 RUE CATHERINE DE SAVOIE  
City of Mailing Address:: MEYLAN  
State or Province of Mailing  
Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing  
Address:: B-5000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: BELGIUM  
Status:: Full Capacity  
Given Name:: JEAN  
Middle Name::  
Family Name:: MULLIER  
Name Suffix::  
City of Residence:: PERWEZ  
State or Province of  
Residence::  
Country of Residence:: BELGIUM  
Street of Mailing Address:: 15 RUE D'OPPREBAIS  
City of Mailing Address:: MONT SAINT AIGNAN  
State or Province of Mailing  
Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing  
Address:: B-1360



Applicant Authority Type:: Inventor  
Primary Citizenship Country:: BELGIUM  
Status:: Full Capacity  
Given Name:: OLIVIER  
Middle Name::  
Family Name:: HIMMER  
Name Suffix::  
City of Residence:: BOUGE  
State or Province of  
Residence::  
Country of Residence:: BELGIUM  
Street of Mailing Address:: 8 RUE DELIMOY  
City of Mailing Address:: LANDEDA  
State or Province of Mailing  
Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing  
Address:: B-5004

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: BELGIUM  
Status:: Full Capacity  
Given Name:: JEAN-PAUL  
Middle Name::  
Family Name:: FORTHOMME  
Name Suffix::  
City of Residence:: ST SYMPHORIEN  
State or Province of  
Residence::  
Country of Residence:: BELGIUM  
Street of Mailing Address:: 10 AVENUE PRINCESSE PAOLA  
City of Mailing Address:: LARMOR PLAGE  
State or Province of Mailing

Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing B-7030

Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: MICHAEL

Middle Name::

Family Name:: BREYSSE

Name Suffix::

City of Residence:: SAINT-PIERRE DE CHANDIE

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing Address:: 5 RUE DE FRINDEAU

City of Mailing Address:: PUYMIROL

State or Province of Mailing

Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing F-69790

Address::

**Correspondence Information**

Correspondence Customer 00466

Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/001861	7/15/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03/08698	7/16/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::